

Signature of Owner/Agent

**Customer Service: 206-684-3000** 

For Internal Use Only--Service Center Staff

Daytime Phone \_

Toll Free: 1-800-862-1181

TTY: 206-684-3225

## RESIDENTIAL ELECTRIC SERVICE APPLICATION Open New Account

<ul> <li>To open a Seattle City Light account:</li> <li>✓ Applicant's identity must be validated (see below)</li> <li>✓ Complete the section below or complete an online http://www.seattle.gov/light/accounts/resa/</li> <li>✓ FAX to 684-3347 or Mail in.</li> <li>✓ For late notification, accounts will be opened the</li> </ul>	e application:	Type of ID: Date of Verification: Verified by: is received.			
	d bottom section tape and				
To Open a City Light Account Complete the F Premises (Where Electricity is Used)	Apt No.	Zip	Date	to Open	
Occupant's Full Name		Daytime	Phone	Employer	
Co-Occupant's Full Name		Daytime	Phone	Employer	
Mailing Address if Different From Premises		State		Zip	
Will You □Own □Rent If you are renting plea	se enter name, addre	ss, phone nu	mber of th	ne Owner/Agent	
Have We Served You before?  No Yes If yes, please enter previous address  Please Check a Meter Reading Option To Open Account:  I am providing my Meter Reading (Use Meter Picture):  Electric Meter Number  Date Meter Read	S: 9 0 1 2 8 2 2	5 2 8 2 8	DIAL METEI 4 DIAL	R—————————————————————————————————————	
Estimate my Meter Reading.	7 6 5 4 3	6 5 4 3 4 5 6 7 6 5 4 3 4 5 6 7 7 6 5 4 3			
		ľ	Mark the dia	Is exactly as viewed.	
For Identity Validation If this is your first utility account with the City of Seatt following options:  • visit one of our City of Seattle service centers in position attach a licensed notary statement or  • property owner/agent signs and dates the section  I (print name) of Washington that the foregoing is true and correct. I am the owner/agent for the property located at	erson. For more infor below declare under pe	mation, conta	act us at 2	206.684.3000 or the laws of the State	
I am submitting this application on behalf of the above lists Federal Trade Commission Red Flag Rules, and the City of					

**CITY** 

SCL will notify landlords by mail when their tenants are delinquent and have received either an Urgent Notice of impending shut off or a

\_City\_\_\_\_State\_\_Zip\_\_

Final Notice of impending shut off, provided that the owner / landlord has supplied SCL with their correct mailing address.

Date /